FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000026546 (8)

O & G BOOKKEEPING SERVICES, INC.

FILED Apr 14 1998 8:00am Secretary of State

Principal Plac	ce of Business	Mailing Address				- I LOBERTON DE COLOR DEPLE DE LES DECENTROS DE LES	DARIO ALBAN DA	IBI BARN BÜ	18 8111 1881	
5224 YATES RD LAKELAND FL 33611		POST OFFICE BOX 6255	POST OFFICE BOX 6255 LAKELAND FL 33807			ì				
		LAKELAND FL 33807				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified				7
						03/30/1995				
2. Principal P	Place of Business	2a, Mailing Address				4. FEI Number Applied For]
n		26				59-3327299			ot Applicable	4
Suite, Apt. #, etc.		Suite, Apt. #, etc.	├			5. Certificate of Status Desired		, .	Additional	
22 City & State 1		City & State	City & State			Station Committee State of the		Fee Re		4
23		- -	28			B. Election Campaign Financing Trust Fund Contribution	\Box		May Be to Fees	1
Zip Country		Zip				8. This corporation owes or has paid the current year Intangible				1
24 25		29	30			Personal Property Tax due June 3	_] No	
	g. Name and Address of Curr	ent Registered Agent		2.1		10. Name and Address of New Regi	stered Ag	ent		7
	rter, opal s			81	Name					
	24 YATES ROAD			82	Street Addre	dress (P.O. Box Number is Not Acceptable)				1
LA	KELAND FL 33811			83						-
					<u> </u>					
				84	City		FL '	85 Zip	Code	7
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statu	les, the a	bove	named corp	oration submits this statement for the pu	1	anging if	s registered	┨
office or I	registered agent, or both, in the Sta am familiar with, and accept the obl	te of Florida. Such change was loations of Section 607 0505. Fl	authorize orida Stat	d by tutes	the corporati	oration submits this statement for the pul ion's board of directors. I hereby accept	the appoin	tment as	registered	1
SIGNATURE		ganons of godinar oor tooot to	0.100		•					
SIGNATURE	Signature, typed or printed name of registered a		E: Registere	d Age	nt signature requir	ed when reinstating)	DATE			۱۲
12.		ND DIRECTORS DELETE	13.	·		ADDITIONS/CHANGES TO OFFICE				18
TITLE	PD CAPTED ORM C	L) DEER	1.1 T)				<u> </u>	Change	Addition	15
NAME STREET ADDRESS	CARTER, OPAL S 5224 YATES RD.		1.2 N		ADDRESS					18
CITY-ST-ZIP	A A CAMPA E A CAMPA A			TY-SI	i					l S
TITLE	D	DELETE	2.1 Ti		1-211			Change	Addition	12
NAME	SMITH, REGINA O	·	2.2 N	AME	İ					
STREET ADDRESS 5224 YATES RD.			2.3 S1	TREET .	address					1
CITY-ST-ZIP	LAKELAND FL 33811	AND FL 33811 2.4		4 CITY-ST-ZIP		<u></u>]
TITLE		☐ DELETE	3.1 11	TLE	Į			Change	Addition	Į
NAME			3.2 N		1					
STREET ADDRESS			•		ADDRESS [
CATY-ST-ZIP TITLE		DELETE	3.4. C 4.1 TI		T-21P			Change	Addition	+
NAME		L_J DELETE	4.2 N		}			Jimilyo	AQQIIIOII	
STREET ADDRESS					ADORESS					1
CITY-ST-ZIP			1	TY-S1	1				. •	Ì
TITLE		DELETE	5.1 Ti					Change	Addition	1
NAME			5.2 N/	ME						
STREET ADDRESS			5.3 ST		ADDRESS					1
CITY-ST-ZIP		17 55	5.4 CI		- ZIP			01	1.000	1
TITLE "		DELETE 6.1 T					نا	Change	Addition	
NAME			6.2 N							1
STREET ADDRESS					ADDRESS					
14. I hereby o	certify that the information supplied	with this filing does not qualify f	6.4 Cl or the exe			Section 119.07(3)(i), Florida Statutes, I fu	rther certify	that the	information	1

Indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio indicated on this annual report or supplied much report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

SIGNATURE:

941-646 136L